

Mr. Robert D. Hutchinson
Daramic Incorporated
3430 Cline Road
Corydon, Indiana 47112-8706

Re: 061-11737-00012
First Administrative Amendment to
Part 70 T061-5983-00012

Dear Mr. Hutchinson:

Exide Corporation - Battery Separator Division was issued a permit on September 7, 1999 for a stationary battery separator manufacturer. A letter requesting a transfer of ownership was received on January 4, 2000. Pursuant to the provisions of 2-7-11 the permit is hereby administratively amended as follows:

The name of the company has been changed from Exide Corporation - Battery Separator Division, 3430 Cline Road, Corydon, Indiana 47112 to Daramic Incorporated, at the same address. The appropriate Reporting Forms were changed also to reflect the new name.

All other conditions of the permit shall remain unchanged and in effect. Please attach a copy of this amendment and the following revised permit pages to the front of the original permit.

This decision is subject to the Indiana Administrative Orders and Procedures Act - IC 4-21.5-3-5. If you have any questions on this matter, please contact Gary Freeman, at (800) 451-6027, press 0 and ask for Gary Freeman or extension 3-5334, or dial (317) 233-5334.

Sincerely,

Paul Dubenetzky, Chief
Permits Branch
Office of Air Management

Attachments: Reporting Forms

PD/gkf

cc: File - Harrison County
U.S. EPA, Region V
Harrison County Health Department
Air Compliance Section Inspector - Joe Foyst
Compliance Data Section - Karen Nowak

PART 70 OPERATING PERMIT OFFICE OF AIR MANAGEMENT

**Daramic Incorporated
3430 Cline Road
Corydon, Indiana 47112-8706**

(herein known as the Permittee) is hereby authorized to operate subject to the conditions contained herein, the source described in Section A (Source Summary) of this permit.

This permit is issued in accordance with 326 IAC 2 and 40 CFR Part 70 Appendix A and contains the conditions and provisions specified in 326 IAC 2-7 and 326 IAC 2-1-3.2 as required by 42 U.S.C. 7401, et. seq. (Clean Air Act as amended by the 1990 Clean Air Act Amendments), 40 CFR Part 70.6, IC 13-15 and IC 13-17.

Operation Permit No.: T061-5983-00012	
Issued by: Janet G. McCabe, Assistant Commissioner Office of Air Management	Issuance Date: September 7, 1999

First Administrative Amendment: 061-11737	Pages Affected: Cover, 45, 46, 48 and 49
Issued by: Paul Dubenetzky, Branch Chief Office of Air Management	Issuance Date:

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR MANAGEMENT
COMPLIANCE DATA SECTION**

**PART 70 OPERATING PERMIT
CERTIFICATION**

Source Name: Daramic Incorporated
Source Address: 3430 Cline Road, Corydon, Indiana, 47112-8706
Mailing Address: 3430 Cline Road, Corydon, Indiana, 47112-8706
Part 70 Permit No.: T-061-5983-00012

**This certification shall be included when submitting monitoring, testing reports/results
or other documents as required by this permit.**

Please check what document is being certified:

9 Annual Compliance Certification Letter

9 Test Result (specify) _____

9 Report (specify) _____

9 Notification (specify) _____

9 Other (specify) _____

I certify that, based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.

Signature:

Printed Name:

Title/Position:

Date:

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR MANAGEMENT
COMPLIANCE DATA SECTION
P.O. Box 6015
100 North Senate Avenue
Indianapolis, Indiana 46206-6015
Phone: 317-233-5674
Fax: 317-233-5967**

**PART 70 OPERATING PERMIT
EMERGENCY/DEVIATION OCCURRENCE REPORT**

Source Name: Daramic Incorporated
Source Address: 3430 Cline Road, Corydon, Indiana, 47112-8706
Mailing Address: 3430 Cline Road, Corydon, Indiana, 47112-8706
Part 70 Permit No.: T-061-5983-00012

This form consists of 2 pages

Page 1 of 2

Check either No. 1 or No.2

- 9** 1. This is an emergency as defined in 326 IAC 2-7-1(12)
- C The Permittee must notify the Office of Air Management (OAM), within four (4) business hours (1-800-451-6027 or 317-233-5674, ask for Compliance Section); and
- C The Permittee must submit notice in writing or by facsimile within two (2) days (Facsimile Number: 317-233-5967), and follow the other requirements of 326 IAC 2-7-16
- 9** 2. This is a deviation, reportable per 326 IAC 2-7-5(3)(c)
- C The Permittee must submit notice in writing within ten (10) calendar days

If any of the following are not applicable, mark N/A

Facility/Equipment/Operation:

Control Equipment:

Permit Condition or Operation Limitation in Permit:

Description of the Emergency/Deviation:

Describe the cause of the Emergency/Deviation:

If any of the following are not applicable, mark N/A

Page 2 of 2

Date/Time Emergency/Deviation started:
Date/Time Emergency/Deviation was corrected:
Was the facility being properly operated at the time of the emergency/deviation? Y N Describe:
Type of Pollutants Emitted: TSP, PM-10, SO ₂ , VOC, NO _x , CO, Pb, other:
Estimated amount of pollutant(s) emitted during emergency/deviation:
Describe the steps taken to mitigate the problem:
Describe the corrective actions/response steps taken:
Describe the measures taken to minimize emissions:
If applicable, describe the reasons why continued operation of the facilities are necessary to prevent imminent injury to persons, severe damage to equipment, substantial loss of capital investment, or loss of product or raw materials of substantial economic value:

Form Completed by: _____

Title / Position: _____

Date: _____

Phone: _____

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR MANAGEMENT
COMPLIANCE DATA SECTION**

**PART 70 OPERATING PERMIT
NATURAL GAS FIRED BOILER CERTIFICATION**

Source Name: Daramic Incorporated
Source Address: 3430 Cline Road, Corydon, Indiana, 47112-8706
Mailing Address: 3430 Cline Road, Corydon, Indiana, 47112-8706
Part 70 Permit No.: T-061-5983-00012

**This certification shall be included when submitting monitoring, testing reports/results
or other documents as required by this permit.**

Report period

Beginning: _____

Ending: _____

Boiler Affected

Alternate Fuel

Days burning alternate fuel
From To

I certify that, based on information and belief formed after reasonable inquiry, the statements and information in the document are true, accurate, and complete.

Signature:

Printed Name:

Title/Position:

Date:

**INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT
OFFICE OF AIR MANAGEMENT
COMPLIANCE DATA SECTION**

**PART 70 OPERATING PERMIT
SEMI-ANNUAL COMPLIANCE MONITORING REPORT**

Source Name: Daramic Incorporated
Source Address: 3430 Cline Road, Corydon, Indiana, 47112-8706
Mailing Address: 3430 Cline Road, Corydon, Indiana, 47112-8706
Part 70 Permit No.: T-061-5983-00012

Months: _____ **to** _____ **Year:** _____

This report is an affirmation that the source has met all the compliance monitoring requirements stated in this permit. This report shall be submitted semi-annually. Any deviation from the compliance monitoring requirements and the date(s) of each deviation must be reported. Additional pages may be attached if necessary. This form can be supplemented by attaching the Emergency/Deviation Occurrence Report. If no deviations occurred, please specify in the box marked "No deviations occurred this reporting period".

9 NO DEVIATIONS OCCURRED THIS REPORTING PERIOD

9 THE FOLLOWING DEVIATIONS OCCURRED THIS REPORTING PERIOD.

Compliance Monitoring Requirement (e.g. Permit Condition D.1.6)	Number of Deviations	Date of each Deviation

Form Completed By: _____
Title/Position: _____
Date: _____
Phone: _____

Attach a signed certification to complete this report.